



U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

REC-25

REQUEST FOR CONTINUED EXAMINATION (RCE)

TRANSMITTAL FORM (37 C.F.R. § 1.114)

DOCKET NO. 10191/1855	APPLICATION SERIAL NO. 09/856,905	EXAMINER Philip B. Tran	1. By the 2. By the 3. By the
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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Applicant(s):
Rolf Kohler et al.

Mail Stop RCE
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Date: 2/8/2007

Signature: AARON C. DEDITCH
(33,865)

This is a **request for continued examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 09/856,905, filed on September 4, 2001, entitled METHOD AND DEVICE FOR SELECTING DIFFERENT FUNCTIONS FOR IMPLEMENTATION AT A TERMINAL OF A CONTROL UNIT:

The following constitute the submission **required** by 37 C.F.R. § 1.114(a) and is attached:

- ☒ Reply AMENDMENT AFTER A FINAL OFFICE ACTION (of June 9, 2006)
☐ Information Disclosure Statement
☐ Drawing Changes
☐ Other Submission: _____

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached Amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE						790.00
TOTAL CLAIMS	8	20	20	0	50.00	0.00
INDEPENDENT CLAIMS	2	3	3	0	200.00	0.00
MULTIPLE DEPENDENT CLAIM					300.00	
					Number extra must be zero or larger	TOTAL 790.00
If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.						SMALL ENTITY TOTAL

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2. Please charge the required RCE and submission filing fee of **\$790.00** to the deposit account of **Kenyon & Kenyon LLP, deposit account number 11-0600**.
3. While no extension fees are believed to be due, the Commissioner is hereby authorized, as necessary and/or appropriate, to charge payment of any other fees (including any additional claim fees and/or extension fees) required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account number **11-0600** of **Kenyon & Kenyon LLP**.
4. **A duplicate copy** of this Transmittal Form is enclosed for the above purposes.

Dated: 2/8/2007

Respectfully submitted,

By: 

Gerard A. Messina, Reg. No. 35,952

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